In rc Laurie R. Montalto

Debtor(s)

Case Number: 8-14-71323

(If known)

According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):

The presumption arises.

The presumption does not arise.

## SECOND AMENDED CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

☐ The presumption is temporarily inapplicable.

In addition to Schedules I and I, this statement must be completed by every individual chapter 7 debtor. If none of the exclusions in Part I applies, joint debtors may complete one statement only. If any of the exclusions in Part I applies, joint debtors should complete separate statements if they believe this is required by § 707(b)(2)(C).

	Part I. MILITARY AND NON-CONSUMER DEBTORS
1A	Disabled Veterans. If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	□ Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
ΙB	Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends.
1C	Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	a. □ I was called to active duty after September 11, 2001, for a period of at least 90 days and □ I remain on active duty /or/
	☐ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;
	OR
	<ul> <li>b. ☐ I am performing homeland defense activity for a period of at least 90 days /or/</li> <li>☐ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.</li> </ul>

B22A (Official Form 22A) (Chapter 7) (04/13)

	Part II. CALCULATION OF M	ION	THLY INCO	M)	E FOR § 70	7(b)(7	7) E	XCLUSION	Ī	
	Marital/filing status. Check the box that applies a	nd c	omplete the balance	ce c	f this part of th	is state	ment	as directed,		-
	a. Unmarried, Complete only Column A ("Debtor's Income") for Lines 3-11.									
	b. $\square$ Married, not filing jointly, with declaration									
2	"My spouse and I are legally separated under									
2	purpose of evading the requirements of § 707 for Lines 3-11.	(D)(2	(A) of the Bankri	upio	cy Code. Com	ipiete o	пту с	olumn A ("De	otor	s income")
	<b>■</b>	ventic	on of caparata bour	cob	alds set out in 1	Line 2 l	, nho	vo Completa h	oth	Column A
	c. Married, not filing jointly, without the declar ("Debtor's Income") and Column B ("Spou					JIIIC Z.I	าลบบ	ve. Complete i	otn	Column A
	d. Married, filing jointly. Complete both Colu					ın B (''	Spou	se's Income")	for I	ines 3-11.
	All figures must reflect average monthly income re							Column A		Column B
	calendar months prior to filing the bankruptcy case							Debtor's		
	the filing. If the amount of monthly income varied six-month total by six, and enter the result on the a			, yo	u must divide i	the		Income		Spouse's Income
3							\$	1,745.09	¢	
J	Gross wages, salary, tips, bonuses, overtime, con			, .			'b	1,745.09	'b	9,976.1
	Income from the operation of a business, profess enter the difference in the appropriate column(s) of	i <b>on</b> Elin	or farm. Subtract	. LII	ne b from Line	a and				
	business, profession or farm, enter aggregate numb					. Do				
	not enter a number less than zero. Do not include									
4	Line b as a deduction in Part V.	_		_	Jee CACCHIOCIC					
	La Cross respirate	\$	Debtor 0.00	·	Spouse	0.00				
	a. Gross receipts b. Ordinary and necessary business expenses	S	0.00	_		0.00				
	c. Business income	-	otract Line b from		e a	-	\$	0.00	\$	0.0
	Rent and other real property income. Subtract L	ine l	o from Line a and	ente	er the differenc	e in				
	the appropriate column(s) of Line 5. Do not enter a number less than zero. <b>Do not include any</b>									
	part of the operating expenses entered on Line b	as a		rt V						
5	[	6	Debtor	d.	Spouse	0.00				
	a. Gross receipts b. Ordinary and necessary operating expenses	\$	0.00	m-grantenen		0.00				
	c. Rent and other real property income		otract Line b from	-	e a	0.00	\$	0.00	8	0.0
6	Interest, dividends, and royalties.						\$	0.00	\$	0.0
7	Pension and retirement income.						\$	0.00	s	0.0
	Any amounts paid by another person or entity, o	n a	regular basis, for	the	household					
	expenses of the debtor or the debtor's dependent	s, in	cluding child supp	por	t paid for that					
8	purpose. Do not include alimony or separate maint									
	spouse if Column B is completed. Each regular parties if a payment is listed in Column A, do not report the				in only one col	umm;	\$	0.00	\$	0.0
	Unemployment compensation. Enter the amount i				s) of Line 9.		-			
	However, if you contend that unemployment compo	ensa	tion received by yo	011 (	r your spouse					
9	benefit under the Social Security Act, do not list the		ount of such comp	oens	ation in Colum	ın A				
	or B, but instead state the amount in the space belo	w:		-						
	Unemployment compensation claimed to be a benefit under the Social Security Act Debtor	\$	0.00 Spc	ous	: \$	0.00	\$	0.00	\$	0.0
	Income from all other sources. Specify source and	l am	ount. If necessary,	, lis	t additional sou	urces				
	on a separate page. Do not include alimony or sep	arat	e maintenance pa	ym	ents paid by y	our				
	spouse if Column B is completed, but include all									
	maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or									
10	domestic terrorism.									
			Debtor		Spouse					
	h.	\$ \$		\$		-				
	b. Total and enter on Line 10	1		I p			\$	0.00	¢	0.0
							Φ	0.00	Φ	0.0
11	Subtotal of Current Monthly Income for § 707(b	1/71	Add Lines 2 the	10	in Column A	and ie		1		

12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11. Column A.	\$		11,721.20
	Part III. APPLICATION OF § 707(b)(7) EXCLUSION	N		
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the enter the result.	number 12 and	\$	140,654.40
14	Applicable median family income. Enter the median family income for the applicable state and he (This information is available by family size at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankru			
	a. Enter debtor's state of residence: NY b. Enter debtor's household size:	3	\$	70,151.00
15	Application of Section 707(b)(7). Check the applicable box and proceed as directed.  The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "I top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII		does n	ot arise" at the
	■ The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of	of this statement,		

## Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

	Part IV. CALCUL	ATION OF CUI	RREN	T MONTHLY	INCOM	AE FOR § 7	07(b)(2)	)	
16	Enter the amount from Line 12.						\$	11,721.20	
17	Marital adjustment. If you checked Column B that was NOT paid on a dependents. Specify in the lines be spouse's tax liability or the spouse's amount of income devoted to each not check box at Line 2.c, enter zer	regular basis for the low the basis for exc s support of persons purpose. If necessary	househ luding t other th	old expenses of the he Column B incom an the debtor or the dditional adjustment	debtor or ne (such a debtor's o s on a sep	the debtor's s payment of the dependents) and parate page. If y	e I the		
	a. Husband's Business Ex			\$		7.00 9.00			
	c. Husband's 401(k) Loan			\$		2.62			
	d.			\$					
	Total and enter on Line 17			177-111				B	1,088.62
18	Current monthly income for § 70	7(b)(2). Subtract Lin	ne 17 fr	om Line 16 and ente	er the resu	ılt.	5	\$	10,632.58
	Part V. C.	ALCULATION	OF D	EDUCTIONS	FROM	INCOME			
	Subpart A: De	ductions under St	andar	ds of the Internal	Revenu	e Service (IR	S)		
19A	National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable number of persons. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) The applicable number of persons is the number that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.							5	1,234.00
19B	National Standards: health care. Enter in Line al below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptey court.) Enter in Line b1 the applicable number of persons who are under 65 years of age, and enter in Line b2 the applicable number of persons who are 65 years of age or older. (The applicable number of persons in each age category is the number in that category that would currently be allowed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support.) Multiply Line a1 by Line b1 to obtain a total amount for persons under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for persons 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.								
	Persons under 65 year a1. Allowance per person		a2.	Persons 65 year Allowance per pe			44		
	b1. Number of persons		b2.	Number of persor			0		
	cl. Subtotal	180.00		Subtotal		0	.00 \$	ò	180.00
20A	Local Standards: housing and util Utilities Standards; non-mortgage e available at www.usdoj.gov/ust/ or the number that would currently be any additional dependents whom yo	xpenses for the appli from the clerk of the allowed as exemptio	cable c bankru	ounty and family siz	e. (This	information is mily size consi	sts of		702.00

20B	Local Standards: housing and utilities; mortgage/rent expense. Endusing and Utilities Standards: mortgage/rent expense for your couravailable at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptey of the number that would currently be allowed as exemptions on your feany additional dependents whom you support); enter on Line b the to debts secured by your home, as stated in Line 42: subtract Line b from not enter an amount less than zero.	nty and family size (this in ourt) (the applicable famil deral income tax return, pl tal of the Average Monthly	formation is by size consists of lus the number of by Payments for any				
	a. IRS Housing and Utilities Standards; mortgage/rental expense b. Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	\$	2,448.00 2,683.16				
	c. Net mortgage/rental expense	Subtract Line b from Li		0.00			
21	Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:						
	Local Standards: transportation; vehicle operation/public transportation are entitled to an expense allowance in this category regardless ovehicle and regardless of whether you use public transportation.	f whether you pay the expo					
22A	Check the number of vehicles for which you pay the operating expensions included as a contribution to your household expenses in Line 8,	es or for which the operati	ing expenses are				
	☐ 0 ☐ 1 ■ 2 or more.  If you checked 0, enter on Line 22A the "Public Transportation" amount Transportation. If you checked 1 or 2 or more, enter on Line 22A the Standards: Transportation for the applicable number of vehicles in the Census Region, (These amounts are available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a>	"Operating Costs" amount applicable Metropolitan S	from IRS Local Statistical Area or	684.00			
22B	Local Standards: transportation; additional public transportation for a vehicle and also use public transportation, and you contend that you public transportation expenses, enter on Line 22B the "Public Transportation. (This amount is available at <a href="www.usdoj.go">www.usdoj.go</a> court.)	tional deduction for IRS Local	0.00				
	Local Standards: transportation ownership/lease expense; Vehicle you claim an ownership/lease expense. (You may not claim an owners vehicles.)						
23	Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptey of Monthly Payments for any debts secured by Vehicle 1, as stated in Line the result in Line 23. Do not enter an amount less than zero.	ourt); enter in Line b the t	otal of the Average				
	a. IRS Transportation Standards, Ownership Costs	\$	517.00				
	b. Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$	112.27				
	c. Net ownership/lease expense for Vehicle 1	Subtract Line b from Line		404.73			
	Local Standards: transportation ownership/lease expense; Vehicle the "2 or more" Box in Line 23.  Enter, in Line a below, the "Ownership Costs" for "One Car" from the (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy of Monthly Payments for any debts secured by Vehicle 2, as stated in Line the result in Line 24. Do not enter an amount less than zero.	IRS Local Standards: Tranourt); enter in Line b the toc 42; subtract Line b from	nsportation otal of the Average Line a and enter				
	a. IRS Transportation Standards, Ownership Costs  Average Monthly Payment for any debts secured by Vehicle	\$	517.00				
	b. 2, as stated in Line 42	\$	269.38				
	Other Necessary Expenses: taxes. Enter the total average monthly ex		cur for all federal,	247.62			
	state and local taxes, other than real estate and sales taxes, such as inco- security taxes, and Medicare taxes. Do not include real estate or sales		t taxes, social	2,858.00			

1)22/3	( (,)11101(11 1	onii 227t) (Chapter 7) (O ii (S)					
26	Other N deduction Do not	.  \$	0.00				
27	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.						
28	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.						
29	Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.						
30	Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational payments.						
31	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.						
32	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and cell phone service - such as pagers, call waiting, caller id, special long distance, or internet service - to the extent necessary for your health and welfare or that of your dependents. Do not include any amount previously deducted.						
33	Total E	openses Allowed under IRS Standard	Enter the total of Lines 19 th	nrough 32.	\$	7,332.45	
2.4	Health Insurance, Disability Insurance, and Health Savings Account Expenses. List the monthly expenses in the categories set out in lines a-c below that are reasonably necessary for yourself, your spouse, or your dependents.						
34	a.	Health Insurance	\$	430.00			
	b.	Disability Insurance	\$	0.00			
	c.	Health Savings Account	\$	0.00	\$	430.00	
		t enter on Line 34.  not actually expend this total amour	t, state your actual total averaş	ge monthly expenditures in the space			
35	Continu expenses ill, or dis expenses	\$	0.00				
36	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.						
37	Home en Standard trustee v claimed	\$	0.00				
38	actually i school by documer	on expenses for dependent children less neur, not to exceed \$156.25° per child, y your dependent children less than 18 y tation of your actual expenses, and you y and not already accounted for in the	for attendance at a private or p cars of age. You must provide ou must explain why the amo	ublic elementary or secondary e your case trustee with	\$	0.00	

Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commerced on or after the date of adjustment.

39	Add expe Stan or fr reas	\$	0.00				
40	Con finar	r \$	140.00				
41	Tota	al Additional Expense Deduction	s under § 707(b). Enter the total of	Lines 34 through 40		\$	570.00
		S	Subpart C: Deductions for D	ebt Payment			
42	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and						
		Name of Creditor	Property Securing the Debt	Average Monthly Payment			
	a,	American Honda Finance	2013 Honda Accord Subject to Lease	\$ 112.27	□yes ■no		
	b.	Central Mortgage Company	1967 Louis Kossuth Ave. Ronkonkoma, NY 11779	\$ 2,683.16	■yes □no		
	c.	Charles Schwab	401(k) Loan	\$ 117.44	□yes ■no		
	d.	Teachers Federal	2014 Jeep Cherokee Subject to Lease	\$ 269.38			
43	moto your	or vehicle, or other property necess deduction 1/60th of any amount (	I f any of debts listed in Line 42 are see sary for your support or the support of the "cure amount") that you must pay maintain possession of the property.	of your dependents, you y the creditor in additi	y residence, a ou may include in on to the	\$	3,182.2
43	moto your paym sums the fo	or vehicle, or other property necess deduction 1/60th of any amount (nents listed in Line 42, in order to a in default that must be paid in ordellowing chart. If necessary, list at Name of Creditor	sary for your support or the support of	ccured by your primary of your dependents, you y the creditor in additi The cure amount wou ure. List and total any	y residence, a ou may include in on to the ald include any	\$	3,182.25
43	moto your paym sums	or vehicle, or other property necess deduction 1/60th of any amount ( nents listed in Line 42, in order to s in default that must be paid in or ollowing chart. If necessary, list ac	sary for your support or the support of the "cure amount") that you must pay maintain possession of the property, der to avoid repossession or foreclosed ditional entries on a separate page.	ccured by your primary of your dependents, you y the creditor in additi The cure amount wou ure. List and total any	y residence, a ou may include in on to the ald include any such amounts in	\$	
43	moto your paym sums the fo	or vehicle, or other property necess deduction 1/60th of any amount ( nents listed in Line 42, in order to s in default that must be paid in or collowing chart. If necessary, list ac Name of Creditor -NONE- ments on prepetition priority cla	sary for your support or the support of the "cure amount") that you must paraintain possession of the property der to avoid repossession or foreclos additional entries on a separate page.  Property Securing the Debt  ims. Enter the total amount, divided claims, for which you were liable at	ceured by your primary of your dependents, you the creditor in addition The cure amount wou the List and total any 1/60th of the state of the cure and total any by 60, of all priority of the state of the cure and total and tot	y residence, a ou may include in on to the ild include any such amounts in ne Cure Amount  Cotal: Add Lines claims, such as	\$	0.00
	moto your paym sums the forma.  Paym priori not in	or vehicle, or other property necess deduction 1/60th of any amount (nents listed in Line 42, in order to sin default that must be paid in ordellowing chart. If necessary, list at Name of Creditor -NONE-  ments on prepetition priority claity tax, child support and alimony neclude current obligations, such oter 13 administrative expenses.	sary for your support or the support of the "cure amount") that you must paraintain possession of the property der to avoid repossession or foreclos additional entries on a separate page.  Property Securing the Debt  ims. Enter the total amount, divided claims, for which you were liable at	ceured by your primary of your dependents, your dependents, you the creditor in addition The cure amount wou ure. List and total any 1/60th of the standard priority of the time of your bank er chapter 13, complete	y residence, a but may include in on to the ald include any such amounts in the Cure Amount of the Cure Amou	\$	0.00
	moto your paym sums the formation a.  Paym priorinot in Chap chart, b.	r vehicle, or other property necess deduction 1/60th of any amount (nents listed in Line 42, in order to sin default that must be paid in ordellowing chart. If necessary, list ac Name of Creditor  -NONE-  ments on prepetition priority claity tax, child support and alimony include current obligations, such oter 13 administrative expenses, multiply the amount in line a by  Projected average monthly chart current multiplier for your dississued by the Executive Office information is available at www the bankruptcy court.)	sary for your support or the support of the "cure amount") that you must pay maintain possession of the property. der to avoid repossession or foreclos idditional entries on a separate page.  Property Securing the Debt  ims. Enter the total amount, divided claims, for which you were liable at as those set out in Line 28.  If you are eligible to file a case under the amount in line b, and enter the respect 13 plan payment.  trict as determined under schedules for United States Trustees. (This w.usdoj.gov/ust/ or from the clerk of	becured by your primary of your dependents, you y the creditor in additi The cure amount wou ure. List and total any  1/60th of the  by 60, of all priority of the time of your bank or chapter 13, complete establishing administrative	y residence, a but may include in on to the ald include any such amounts in the Cure Amount of C	\$	0.00
44	moto your paym sums the formal a.  Paym prior; not in Chap chart, b.	r vehicle, or other property necess deduction 1/60th of any amount (nents listed in Line 42, in order to see in default that must be paid in ordelowing chart. If necessary, list ac Name of Creditor  -NONE-  ments on prepetition priority classity tax, child support and alimony include current obligations, such other 13 administrative expenses.  multiply the amount in line a by  Projected average monthly chart Current multiplier for your discussed by the Executive Office information is available at www. the bankruptcy court.)  Average monthly administrative	sary for your support or the support of the "cure amount") that you must pay maintain possession of the property. der to avoid repossession or foreclos diditional entries on a separate page.  Property Securing the Debt  ims. Enter the total amount, divided claims, for which you were liable at as those set out in Line 28.  If you are eligible to file a case under the amount in line b, and enter the respect 13 plan payment.  trict as determined under schedules for United States Trustees. (This w.usdoj.gov/ust/ or from the clerk of the expense of chapter 13 case	ceured by your primary of your dependents, you the creditor in addition The cure amount wou the List and total any 1/60th of the state of your bank or chapter 13, complete estulting administrative states of the time of your bank or chapter 13.	y residence, a but may include in on to the ald include any such amounts in the Cure Amount of C	\$	0.00
44	moto your paym sums the formal a.  Paym prior; not in Chap chart, b.	r vehicle, or other property necess deduction 1/60th of any amount (nents listed in Line 42, in order to sin default that must be paid in ordelowing chart. If necessary, list ad Name of Creditor  -NONE-  nents on prepetition priority claity tax, child support and alimony nelude current obligations, such oter 13 administrative expenses, multiply the amount in line a by  Projected average monthly chartened by the Executive Office information is available at www. the bankruptcy court.)  Average monthly administrative I Deductions for Debt Payment.	sary for your support or the support of the "cure amount") that you must pay maintain possession of the property. der to avoid repossession or foreclos diditional entries on a separate page.  Property Securing the Debt  ims. Enter the total amount, divided claims, for which you were liable at as those set out in Line 28.  If you are eligible to file a case under the amount in line b, and enter the respect 13 plan payment. The total action of the clerk of the complete 13 plan payment.  The complete 13 plan payment of the clerk of the complete 13 case.  Enter the total of Lines 42 through 4	ceured by your primary of your dependents, you the creditor in addition. The cure amount wou ure. List and total any 1/60th of the second of all priority of the time of your bank or chapter 13, complete estulting administrative.	y residence, a but may include in on to the ald include any such amounts in the Cure Amount of C	\$	0.00
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50	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result.	\$ -452.12							
51	60-month disposable income under § 707(b)(2). Multiply the amount in Line 50 by the number 60 and enter the result.	\$ -27,127.20							
	Initial presumption determination. Check the applicable box and proceed as directed.								
52	■ The amount on Line 51 is less than \$7,475*. Check the box for "The presumption does not arise" at the top of p statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI.	age 1 of this							
	☐ The amount set forth on Line 51 is more than \$12,475* Check the box for "The presumption arises" at the top statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remained								
	☐ The amount on Line 51 is at least \$7,475*, but not more than \$12,475*. Complete the remainder of Part VI (L.	ines 53 through 55).							
53	Enter the amount of your total non-priority unsecured debt	\$							
54	Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result.	\$							
	Secondary presumption determination. Check the applicable box and proceed as directed.								
55	☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not aris of this statement, and complete the verification in Part VIII.	☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1							
	☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumpti of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.	on arises" at the top							
	Part VII. ADDITIONAL EXPENSE CLAIMS								
56	Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the you and your family and that you contend should be an additional deduction from your current monthly income under 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should reflect your average reach item. Total the expenses.	er §							
50	Expense Description Monthly Amour	ıt]							
	a. \$								
	b. \$ c. \$	-							
	d. \$								
	Total: Add Lines a, b, c, and d \$								
	Part VIII. VERIFICATION								
	I declare under penalty of perjury that the information provided in this statement is true and correct. (If this is a joint	t case, both debtors							
	must sign.)								
57	Date: Signature: Isl Laurie R. Montalto Laurie R. Montalto (Debtor)	5 S							

Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.